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Under the Papenwork Reduction Act of 1995, no persons are		Approved for use through 11/30/2005. OMB 0651-0035 Fradermark Office; U.S. DEPARTMENT OF COMMERCE formation unless it displays a valid OMB control number.
POWER OF ATTORNEY and CORRESPONDENCE ADDRESS	Application Number	10/604,504
	Filing Date	JULY 25, 2003
	First Named Inventor	CLARK C. DAVIS
	Title	Medical Device for Navigation
	Art Unit	3738

CORRESPONDENCE ADDRESS **INDICATION FORM** Examiner Name ANURADHA ROY **Attorney Docket Number** 1001,1869101 I hereby revoke all previous powers of attorney given in the above-identified application. I hereby appoint: 28075 Practitioners associated with the Customer Number: OR Practitioner(s) named below: Nama Registration Number as my/our allomay(a) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The address appociated with the above-memoraed Customer Number: OR The address associated with Customer Number: OR Firm or individual Name Address State Zip City Country Fax Telephone <u>am ma</u>. Applicant/inventor. Assigned of recordiof the entire interest. Set 37 CFR 3.71. Statement under 3/4 CFR 3,73(b) is enclosed. (Form PTO/SB/98) GNATURE of Applicant or Assignee of Record Signature **NOVEMBER 23, 2005** Date Steven A. McAuley Name Telephone Title and Company NOTE. SignAtures of all the invantors or exsigned of record of the White Interest or their representative(s) are required. Submit multiple forms if more than one signature is required, eee below". *Total of forms are submitted.

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